

## **RFP Question and Answer Document**

Question #	RFP Section #	RFP Page #	Question	Response
1	1.3.1	7	May the successful vendor propose their own format for therapeutic class reviews and drug monographs, or is it the state's desire to maintain the existing format?	The Offeror should determine how best to respond to Section 1.3.1. There is no requirement dictating formats for class reviews, monographs, or schedules.
2	1.3.1	7	Will existing class reviews be passed along to the successful vendor to update and maintain, or is it the expectation that the successful vendor develop their own drug class review for the first P&T Committee meeting? If the desire is to maintain the existing format, could the State provide an example?	Existing class reviews and existing formats will be provided to the successful bidder.
3	1.3.1	7	Is the State open to adjusting the review schedule, or is it the desire of the State to keep the existing review schedule?	The Offeror should determine how best to respond to Section 1.3.1. There is no requirement dictating formats for class reviews, monographs, or schedules.
4	1.3.1	7	What is the overall goal of the state in regards to adding new PDL classes and developing new therapeutic class reviews? Is there a specific requirement as to how many classes are added with each year/quarter? If there is no set schedule, would the State be open to adding PDL classes that would have appreciable savings?	DOM intends to have a comprehensive preferred drug list. There is no requirement concerning how classes are to be added. DOM will consider options for adding classes that result in savings to the state if they meet all safety and efficacy considerations.

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5	1.3.1	7	What is the current process for adding newly released drugs to drug classes already on the PDL? Are these drugs reviewed separately from the scheduled class review, or is the new drug's placement on the PDL held until the class is re-reviewed?	New-to-market drugs in classes already on the PDL are considered non-preferred until the next review. The next review may be annual review OR off cycle review.
6	1.3.1	7	What, if any, is the successful vendor's responsibility in regards to passing PDL status information to the claims processor?	The Contractor is responsible for preparing a systems file to claims processor designating preferred (P), non-preferred (NP) or non-reviewed status (NR).
7	1.3.2	8	Does the State consider itself the owner of the supplemental rebate unit data, including pricing? Or does the present vendor state that the State's SR unit pricing data is proprietary? Has it been confirmed with the current rebate vendor that historical claims data, including the historical supplemental rebate unit price information, will be shared with the successful vendor for collections/dispute resolution if the successful vendor agrees to hold said information confidential?	DOM is the owner of the supplemental rebate data. Historical claims data will be provided to the new Contractor. However, the information is considered confidential.
8	1.3.2	8	Are all contracts set to expire prior to a new vendor taking over SR services for Mississippi? If no, how will existing contracts be treated during vendor transition?	Contracts run from January 1 <sup>st</sup> thru December 31 <sup>st</sup> or from July 1st thru June 30 <sup>th</sup> . Existing contracts which end June 30 will need to be modified to reflect new PDL and SR information provided by the new Contractor.
9	1.3.2	8	Does the State currently receive rebates for J-Code products?	At this time, DOM receives federal rebates for J codes, but does not receive Supplemental Rebates for J-codes. DOM is interested in exploring options of obtaining Supplemental Rebates for preferred drugs administered and billed as J-Codes.

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10	1.3.2	9	Is it the expectation of the successful vendor to resolve disputes with drug manufacturers left over from the previous vendor?	Yes.
11	1.3.2.7	9	Does the State wish the new vendor to complete a reconciliation of the former vendor: supplemental rebate data and collections?	Yes.
12	1.5	10	Are "key personnel" required to be located in Mississippi?	Key Personnel must be accessible to DOM, but it is not mandatory that they be located in Mississippi.
13	1.1	5	Will a proposed "single state" approach to supplemental rebate contracting be deemed a responsive bid for this RFP if the bidder can demonstrate how it will provide a better advantage for the state?	Yes.
14	1.1	5	Will the Offeror awarded a contract pursuant to this RFP be required to currently participate in or administer a multi-state purchasing pool?	No. DOM will consider innovative approaches and will award a contract based on a combination of technical and cost components.
15	1.1	5	Is DOM required to award a contract for this RFP or does it have the option to extend the contract with its current vendor? If DOM has the option to extend the contract with its current vendor, what will be the term of that contract?	Renewal options with the current Contractor have been exhausted.
16	1.2	5 and 6	What is the first rebate quarter for which the new vendor will be responsible?	The implementation phase begins October 20, 2011. The operations phase begins January 1, 2012. The new Contractor will be required to bill for rebates for the fourth quarter of 2011.

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17	1.2	6	With a 10/20/11 start date, what is the expected effective date of the new supplemental contracts (i.e. 1/1/12)?	January 1, 2012
18	1.3.1	7	Will the Contractor be responsible for either selecting or assisting DOM in the selection of Pharmacy and Therapeutics (P&T) Committee members? If so, please explain the Contractor's responsibilities.	The Contractor will not participate in the selection of P & T Committee members.
19	1.3.1.1.	7	Will the Contractor be responsible for expenses related to P&T Committee meetings such as honorarium payments to P&T Committee members or arranging for meeting locations? If so, please explain the Contractor's responsibilities and if known, the expenses involved.	The Contractor will only be responsible for requirements detailed in the RFP.
20	1.3.1.2.	7	How many P&T Committee meetings are scheduled per year? What is the schedule for 2012?	There are four quarterly P & T meetings annually as stipulated in state law. Meeting are usually held second Tuesday of March, April, September and October. Tentative meeting dates for 2012 are 3-13-2012, 4-10-2012, 9-11-2012, and 10-9-2012.
21	1.3.1 (3)	7	Can the State provide examples of previous articles produced for the MS Medicaid Provider Bulletin by the incumbent vendor?	The current Contractor has not produced articles for MS Medicaid Provider Bulletin. The Contractor will be required to provide documentation and information to DOM to be used in various communications with providers and the public.
22	1.3.1.8	8	Please identify DOM's RDUR vendor and fiscal agent as well as any other DOM vendors with which the Contractor will be required to work.	DOM's current RDUR contractor is the University of Mississippi School of Pharmacy, Evidence Based DUR-Initiative. The current fiscal agent is ACS State Healthcare.

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23	1.3.2	8	Will the Contractor be responsible for any supplemental rebate administration activities for rebate quarters prior to the first rebate quarter to which supplemental rebate agreements negotiated by the Contractor apply? If so, please explain all rebate administration activities for which the Contractor will be responsible. Also, please identify the supplemental rebate data that will be transferred to the Contractor including the data type (e.g., utilization, invoices, reconciliation, etc.), quarters involved and media type (e.g., electronic, paper, etc.).	The Contractor will be responsible for any outstanding supplemental rebate reconciliation and disputes.  Contractor will be required to perform historical reconciliations and prior period adjustments to bring reconciliation data up to date.  Data elements and file layouts are not available at this time but will be provided after award of the contract to the successful Offeror.
24	1.3.2.1	8	Will the Contractor be required to negotiate rebates on DOM's behalf for diabetic supplies?	A determination has not been made regarding whether diabetic supplies will be billed through the pharmacy program or Point of Sale claims processing system.
25	1.3.2 (1)	8	Please provide the anticipated start date for the administration of MCO claims for Supplemental Rebate administration. In addition, please clarify the state's requirement for whether or not separate invoices are needed for each MCO.	The anticipated start date for administration of MCO claims for Supplemental Rebate administration will be January 1, 2012. Separate invoices will be required for each MCO.
26	1.3.1 (3)	8	What is the expected frequency of producing documentation and articles?	The frequency of producing articles and/or documentation is to be determined and upon request from DOM.
27	1.3.1 (6)	8	Is the successful vendor also expected to create and post P&T agendas or to only support the State with this activity?	The Contractor shall create agendas with assistance from DOM. DOM will post agendas.
28	1.3.2 (7)	9	Does the State expect to receive payments directly from manufacturers or to have the vendor receive via lockbox and forward to the State?	Supplemental rebates are sent directly from the manufacturer.

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29	1.3.2.9	9	Will the Contractor be responsible for resolving disputes associated with Medicaid rebates? If so, please explain all of the Contractor's responsibilities related to Medicaid rebate administration.	The Contractor will be responsible, with DOM's assistance, for resolving disputes for supplemental rebates.
30	1.3.2.11	9	DOM requires that the Contractor's automated rebate system log allocate and reconcile payments made to the State by manufacturers/labelers by health plan contractor. Does this requirement pertain only to Medicaid coordinated/managed care utilization? If not, please explain the applicability to fee-for-service utilization. If so, can the Contractor send a consolidated Medicaid coordinated/managed care rebate invoice to manufacturers/labelers or will the Contractor be required to send a rebate invoice for each Medicaid coordinated/managed care contractor?	The requirement to log payments by health plan contractor refers to coordinated care enrollees.  The Contractor will be required to invoice manufacturers separately for each Medicaid coordinated/managed care contractor.
31	1.3.2 #9 and #10	9	How much rebate information is online and how much is contained in paper only?	This information is not available.
32	1.3.2 #9 and #10	9	Please describe the rebate administration runout responsibility for current supplemental rebate vendor in the event a new vendor is selected.	The current Contractor is required to work with DOM and the new Contractor to ensure a smooth transition and continuation of the program.
33	1.3.2 #9 and #10	9	What is the state's requirement for loading SR history including claims data, invoice/financial data, and dispute resolution data into the new system? If there is a requirement to load history, how many years are expected to be loaded? Is there a set of file layouts which can be shared with bidders?	The current Contractor is required to work with DOM and the new Contractor to ensure a smooth transition and continuation of the program.  Data elements and file layouts are not available at this time but will be provided after award of the contract to the successful Offeror.

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34	1.7.2	11	Please identify the date that DOM expects the Operations Phase of the contract to begin.	The Operations Phase will begin January 1, 2012.
35	2.1	14	<ol> <li>The RFP requires Offerors to provide documentation for the following requirements.</li> <li>The Offeror has not been sanctioned by a state or federal government within the last 10 years.</li> <li>The Offeror must have experience in contractual services providing the type of services described in the RFP.</li> <li>The Offeror must be able to provide each required component and deliverable as detailed in the Scope of Work</li> <li>Can the state please clarify whether it requires a specific type of documentation to confirm Offerors meet these requirements, or simply a statement from the Offeror confirming these requirements are met? If the state requires specific documentation, can it please specify?</li> </ol>	DOM does not require a specific type of documentation. The Offeror should respond to these requirements in a manner that best describes their conformity with these items.
36	2.1	14	May Offerors include the required documentation as an attachment to the proposal? Alternately, can the State please advise where in the proposal such documentation should appear?	DOM has no specification concerning how this documentation is presented.
37	3.4.2	17	Bidders are required to include in the proposal, signed copies of any amendments the State may issue throughout the procurement process. May bidders include these amendments in an attachment to the proposal? Alternately, can the State please specify where in the proposal the amendments should appear?	The Offeror should include, with the Transmittal Letter, any amendments issued to the RFP, acknowledged and signed by the Offeror. There should also be a statement in the Transmittal Letter as required at 5.2.11 of the RFP.

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38	5.8	42	This section describes both a 15 day and 5 day minimum schedule for DOM review of deliverables. Please clarify the required deliverable review time which needs to be planned.	This section refers to a high-level work plan and schedule. The 15 day review time refers to major deliverables required by the RFP. The 5 day review time refers specifically to the Deliverables Schedule.
39	5.8	42	Generally, a resubmitted deliverable is addressing specific points/issues. Is the state open to a reduced approval period for resubmissions? If not, please clarify if the expectation in the project plan is a potential total of 30 working days for deliverable approval (in those cases where the initial deliverable is returned with comments).	DOM will respond to submission of deliverables as quickly as possible but in no case will it exceed 15 days.
40	6.1	43	Since the RFP does not indicate a transmittal letter should be included in the business/cost proposal, will the State please confirm our assumption that Offerors' certification that the "offer shall be binding upon the Offeror for a period of 180 days following the proposal due date" should appear in the transmittal letter in the Technical Proposal?	Your assumption is correct.
41	7.2.2.3 (2)	45	Can the state further clarify how much data the chosen vendor will need to load? Specifically, how much:  Historical claims data (Rx and medical)  Also, please clarify if the current vendor will be providing Supplemental rate history and if so, the volume of invoicing history, AR history and dispute history.	DOM's supplemental rebate program has been in existence since April 2006. Historical data since that time will be transferred.